

RECEIVED
CENTRAL FAX CENTER

FEB 27 2007

FAX TRANSMISSION

DATE: February 27, 2007

PTO IDENTIFIER: Application Number 10/719,659
Patent Number

Inventor: Tamir Ben-David et al.

MESSAGE TO: Examiner of Application: Mark Bockelman
US Patent and Trademark Office

FAX NUMBER: 571-273-8300

FROM: DARBY & DARBY P.C. CUSTOMER NO. 07278

S. Peter Ludwig

PHONE: (212) 527-7770

Attorney Dkt. #: 06727/100J782-US4

PAGES (Including Cover Sheet): 3

CONTENTS: Authorization to Act in a Representative Capacity (1 page)
Certificate of Transmission (1 page)

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (212) 527-7770 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

DARBY & DARBY P.C.
P.O. Box 5257, New York, New York 10150-5257
Telephone: (212) 527-7700 Facsimile: (212) 527-7701

RECEIVED
CENTRAL FAX CENTER

FEB 27 2007

PTO/SB/07 (09-04)

Approved for use through 07/31/2006, OMB 0651-0031

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

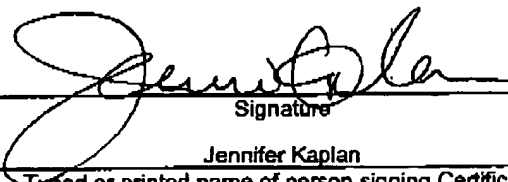
Application No. (if known): 10/719,659

Attorney Docket No.: 06727/100J782-US4

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on February 27, 2007
Date


Signature

Jennifer Kaplan

Typed or printed name of person signing Certificate

Registration Number, if applicable

(212) 527-7700
Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Authorization to Act in a Representative Capacity (1 page)
Fax Transmission Cover Sheet (1 page)

Sample Form (09-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: Tamir Ben-David et al.	
Application No. 10/719,659	
Filed: November 30, 2003	
Title: SELECTIVE NERVE FIBER STIMULATION FOR TREATING HEART CONDITIONS	
Attorney Docket No. 06727/100j782-us4	Art Unit: 3766

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Sanford T. Colb	26,856

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

SIGNATURE of Practitioner of Record

Signature	<i>Mitchell Bernstein</i> Mitchell Bernstein, Reg. No. 46,550 for	Date	February 27, 2007
Name	S. PETER LUDWIG	Registration No., if applicable	25,351
Telephone	212-627-7700		

This form offers a sample or suggested format for an authorization for an agent. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.